Case 18-30896 Doc 1 Filed 06/11/18 Entered 06/11/18 16:59:06 Desc Main Document Page 1 of 60

Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
WESTERN DISTRICT OF NORTH CAROLINA	_		
Case number (if known)	Chapter you are filing under:		
	☐ Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	Chapter 13	_	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Ernest First name Milton Middle name Kidwell, III Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Mickey Kidwell	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6431	

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Case number (if known)

Debtor 1 Ernest Milton Kidwell, III

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		2711 Chickadee Drive Charlotte, NC 28269					
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Mecklenburg					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		P.O. Box 561167 Charlotte, NC 28256					
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Debtor 1 Ernest Milton Kidwell, III

Case number (if known)

ar	t 2: Tell the Court About	our B	ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7							
	choosing to file under								
		□с	hapter 11						
		□с	hapter 12						
		■ C	hapter 13						
			·						
3.	How you will pay the fee		about how yo	ay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details now you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money f your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with rinted address					
					allments. If you choose to (Official Form 103A).	this option, sign and a	attach the Application	for Individuals to Pay	
			J		ived (You may request th	nis option only if you a	are filing for Chapter 7	7. By law, a judge may,	
			applies to you	ur family size an	our fee, and may do so o d you are unable to pay t Chapter 7 Filing Fee Waiv	he fee in installments). If you choose this o	option, you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	■ No							
	iast o years?	□ Ye			When		Casa numbar		
			District District		When _ When		Case number Case number		
			District		When		Case number		
			DISTRICT		wwien				
10.	Are any bankruptcy	■ No)						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Ye	9 S.						
	affiliate?		Debtor				Relationship to you		
			District		When		Case number, if know		
			Debtor				Relationship to you		
			District		When		Case number, if know	 vn	
							,		
11.	Do you rent your residence?	■ No	Go to I	ine 12.					
		□ Ye	es. Has yo	our landlord obta	ined an eviction judgmen	nt against you?			
				No. Go to line 1	12.				
				Yes. Fill out <i>Ini</i> this bankruptcy	tial Statement About an E petition.	Eviction Judgment Ag	ainst You (Form 101 <i>i</i>	A) and file it as part of	

		Document	Page 4 of 60	
Debtor 1	Ernest Milton Kidwell, III			Case number (if known)

Az eyou a sole proprietor of any full- or part-time business? Name and location of business Name of business, if any Name of business defined in 11 U.S.C. § 101(51B) Name of business defined in 11 U.S.C. § 101(51B) Name of business defined in 11 U.S.C. § 101(51B) Name of business debtor, you must attach your most recent balance sheet, state Name of business debtor, you must attach your most recent balance sheet, state Name of business debtor, you must attach your most recent balance sheet, state	art	Report About Any Bu	sinesses	You Owr	n as a Sole Propriet	or				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Number, Street, City, State & ZIP Code	12.	of any full- or part-time	■ No.	Go to	Part 4.					
Name of business, you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate is need and attach it to this petition. Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(61B)) None of the above			☐ Yes.	Name	e and location of bus	iness				
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Number, Street, City, State & ZIP Code		business you operate as an individual, and is not a separate legal entity such as a corporation,		Name	e of business, if any					
Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(65A)) None of the above If you are filling under Chapter 11 of the Bankruptcy Code and are you a small business debtor.		sole proprietorship, use a		Numb	oer, Street, City, Stat	e & ZIP Code				
Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(63A)) None of the above Very commodity Broker (as defined in 11 U.S.C. § 101(63A)) None of the above If you are filling under Chapter 11, the court must know whether you are a small business debtor so that it can set ap deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stat operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poprations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poprations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poprations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poprations of the definition in the Bankrup lam not filing under Chapter 11. No. I am not filing under Chapter 11. but I am NOT a small business debtor according to the definition in the Bankrup lam not property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? No. Yes. If immediate attention is needed, why is it needed? What is the hazard? Where is the property? Where is the property Where is the property? Where is the property Where is				Chec	k the appropriate bo	x to describe vour business:				
Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above None of the above None of the above						·				
Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under Chapter 11 of the Bankrupty Code and are you as mall business debtor according to the definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11. but I am NOT a small business debtor according to the definition in the Bankrupt I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrupt I alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? Stockbroker (as defined in 11 U.S.C. § 101(6)) None of the above										
Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above					_					
None of the above None of the above					•	- ' '				
IS. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, the court must know whether you are a small business debtor you must attach your most recent balance sheet, state operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the position of small business debtor, see 11 U.S.C. § 101(51D). I am not filing under Chapter 11. No. I am filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrup Pes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrup Per Ves. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrup What is the hazard or of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Where is the property? Where is the property?				_	_	• • • • • • • • • • • • • • • • • • • •				
Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrup I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrup Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention I immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stat operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the poperations, follow the poperations, follow the poperations, follow the poperations, follow the poperations in 11 U.S.C. § 10 May 1 I I I I I I I I I I I I I I I I I I										
For a definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrup	Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the you a small business in 11 U.S.C. 1116(1)(B).					a small business debtor, you must attach your most recent balance sheet, statement of				
business debtor, see 11 U.S.C. § 101(51D). No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Baccode. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrup Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrup Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. Yes. What is the hazard? Yes. What is the hazard? If immediate attention is needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		For a definition of small	■ No.	I am ı	not filing under Chap	ter 11.				
Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? What is the hazard? If immediate attention is needed? Where is the property? Where is the property?		business debtor, see 11	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? No. Yes. What is the hazard? If immediate attention is needed? Where is the property?			☐ Yes.	I am i	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? What is the hazard? If immediate attention is needed? Where is the property?	Part	4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention				
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? What is the hazard? If immediate attention is needed? Where is the property?	14.	Do you own or have any	■ No							
public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? If immediate attention is needed, why is it needed? Where is the property?		property that poses or is alleged to pose a threat of imminent and	hat poses or is pose a threat Yes. nt and W		the hazard?					
perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?		public health or safety? Or do you own any property that needs								
Number, Street, City, State & Zip Code		perishable goods, or livestock that must be fed, or a building that needs		Where i	s the property?					
		•				Number, Street, City, State & Zip Code				

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Debtor 1 Ernest Milton Kidwell, III

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 60 Case number (if known) Debtor 1 **Ernest Milton Kidwell, III** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ernest Milton Kidwell, III

Ernest Milton Kidwell, III Signature of Debtor 1

Executed on June 11, 2018

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

Debtor 1 Ernest Milton Kidwell, III Document Page 7 of 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Heather	r W. Culp	Date	June 11, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
Heather W	. Culp		
	hards, P.A.		
1701 Sout			
Charlotte,	NC 28203		
Number, Street,	City, State & ZIP Code		
Contact phone	704-377-4300	Email address	hculp@essexrichards.com
State Bar	#30386 NC		
Bar number & St	tato		

		1700.11111	eni Paue o ul ou	
Fill in this info	rmation to identify your	case:		
Debtor 1	Ernest Milton Kid	lwell, III		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT O	OF NORTH CAROLINA	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	200,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	48,979.20
	1c. Copy line 63, Total of all property on Schedule A/B	\$	248,979.20
Pai	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	176,204.62
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	12,919.48
	Your total liabilities	\$	189,124.10
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,880.88
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,419.19
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Ernest Milton Kidwell, III

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,741.42

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Cas	se 18-30896	Doc 1		06/11/18 ument	Entered 06/11/1	.8 16:59:06	Des	sc Main	
Filli	in this informa	ation to identify	your case and th			F 80E 10 01 00				
	tor 1	<u> </u>								
Den	101 1	First Name		e Name		Last Name				
	tor 2									
(Spot	ise, if filing)	First Name	Middle	Name		Last Name				
Unit	ed States Bank	kruptcy Court for	the: WESTERN	I DISTRI	CT OF NORT	TH CAROLINA				
Cas	e number					-			☐ Check if the amended	
_		m 106A/B • A/B: Pr	=							12/15
hink nforr Answ	it fits best. Be a mation. If more s er every question	as complete and a space is needed, a on.	accurate as possibl attach a separate si	le. If two i heet to th	married people is form. On the	n asset fits in more than one e are filing together, both are e top of any additional pages	equally responsib	ole for sup	oplying correct	
Part	Describe Ea	ach Residence, Bl	uliding, Land, or Ot	ner Keai	Estate You Ow	n or Have an Interest In				
. Do	you own or ha	ve any legal or eq	uitable interest in a	ny reside	ence, building,	land, or similar property?				
	No. Go to Part 2	2.								
	Yes. Where is t	he property?								
1.1				What	is the property	/? Check all that apply				
	2711 Chick	adee Drive		■ Single-family home Do not de				ecured cla	ims or exemption	ns. Put
	Street address, if a	available, or other desc	cription	_	Duplex or mult		the amount of ar	ny secured	claims on <i>Sche</i>	edule D:
				Ē	Condominium	or cooperative	Creditors vvno F	Creditors Who Have Claims Secured by Property.		
				_	Manager					
	Charlotte	NC	28269-0000			or mobile home	Current value o		Current value	
	City	State	ZIP Code		Land Investment pro	onerty	entire property?		portion you o	,000.00
	o.i.y	Ciaio	2 0000	ō	Timeshare	орону				•
					Other		Describe the na (such as fee sin			
				Who I	nas an interest	in the property? Check one	a life estate), if	known.		
					Debtor 1 only		Fee simple			
	Mecklenbu	rg			Debtor 2 only					
	County				Debtor 1 and I				munity property	,
						f the debtors and another	(see instruction	ons)		
					information you	ou wish to add about this ite on number:	m, such as local			
				Mec	klenburg Co	ounty Parcel #029-522- or believes would sell f				
						3-SP-1754; hearing sch				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here.......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$200,000.00

		Case 18-3	30896 Doc 1		Entered 06/11/	18 16:59:06	Desc Main
De	ebtor 1	Ernest Milto	n Kidwell, III	Document	Page 11 of 60 Cas	se number (if known)	
3.	Cars, vai	ns, trucks, trac	tors, sport utility ve	hicles, motorcycles			
[□No						
ı	Yes						
3	.1 Make			Who has an interest in the	property? Check one	the amount of any s	red claims or exemptions. Put ecured claims on Schedule D:
	Mode Year:		ng	Debtor 1 only		Creditors Who Have	e Claims Secured by Property.
		oximate mileage:	over 50,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 or	nlv	Current value of the entire property?	e Current value of the portion you own?
		r information:		☐ At least one of the debto	•		
		Sedan; 4 cyl; I moon roof; N 200		Check if this is commu (see instructions)	nity property	\$15,200 .	\$15,200.00
Pa Do	rt 3: Des b you ow Househo Example	cou have attachescribe Your Personn or have any leading	ed for Part 2. Write nal and Household It egal or equitable in	terest in any of the followi			\$15,200.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No ■ Yes.	Describe	sofa, loveseat, chairs, 2 bookc	ers, chest of drawers, r chair and ottoman, 4 sr ases, books, washer, d hes, pots/pans, mower, amps, pictures	n. tables, kitchen tab ryer, refrigerator, sm	le w/4	\$2,500.00
	□ No	es: Televisions a		eo, stereo, and digital equip nedia players, games	ment; computers, printers	s, scanners; music co	llections; electronic devices
			2 TVs, Dell desi	ktop computer, printer,	cellphone, stereo		\$550.00
-			_			<u>-</u>	
	Example No		figurines; paintings, ons, memorabilia, co	prints, or other artwork; boo llectibles	ks, pictures, or other art o	objects; stamp, coin, o	or baseball card collections;
	Example No	ent for sports and est Sports, photo musical instru	graphic, exercise, ar	nd other hobby equipment; b	picycles, pool tables, golf	clubs, skis; canoes aı	nd kayaks; carpentry tools;

	Case 18-3		Doc 1	Filed 06/11/18 Document	Entered 06/11/18 16:59:06 Page 12 of 60	
Debtor 1	Ernest Milton	Kidwell	, III		Case number (if know	n)
■ No		shotguns	, ammunitior	n, and related equipment	i	
□ No		hes, furs,	leather coats	s, designer wear, shoes,	accessories	
		Debtor's	s clothing			\$250.00
□ No		elry, costu	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems	s, gold, silver
		Watch				\$30.00
Exam No Yes 14. Any o No Yes 15. Add for	s. Give specific info	mation f all of yo umber he	old items you ur entries fr		ncluding any health aids you did not list ny entries for pages you have attached	\$3,330.00
Do you o	own or have any le	gal or equ	uitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	mples: Money you ha	,		our home, in a safe depo	osit box, and on hand when you file your pe	tition
					Cash on hand.	\$630.00
Exar □ No				al accounts; certificates of counts with the same ins	•	e houses, and other similar
		17.1.	Checking	Wells Far	go checking ending6147	\$5.00
Exar ■ No	ls, mutual funds, on mples: Bond funds, in	nvestmen		ith brokerage firms, mor	ney market accounts	

Case 18-30896 Doc 1 Filed 06/11/18 Entered 06/11/18 16:59:06 Desc Main Page 13 of 60 Case number (if known) Document Debtor 1 **Ernest Milton Kidwell, III** 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **IRA** IRA with Wells Fargo ending9398; value \$29,640,51 \$29,640.51 401K Wells Fargo 401K plan \$173.69 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

		Case 18-30896	Doc 1	Filed 06/11/18 Document	Entered 06/11/18 16:59:06 Page 14 of 60	Desc Main
De	ebtor 1	Ernest Milton Kidwel	II, III		Case number (if known)	
	Examp ■ No	support bles: Past due or lump sum Give specific information	,,,	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Examp	amounts someone owes yoles: Unpaid wages, disabilibenefits; unpaid loans Give specific information	ity insurance p	payments, disability bene someone else	efits, sick pay, vacation pay, workers' comper	nsation, Social Security
31.	_Examp	ts in insurance policies oles: Health, disability, or life	e insurance; h	nealth savings account (F	HSA); credit, homeowner's, or renter's insuran	nce
	■ No □ Yes.	Name the insurance compa Com	any of each po npany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	If you a someo	terest in property that is care the beneficiary of a living the has died. Give specific information			d surance policy, or are currently entitled to rece	eive property because
	Examp ■ No	against third parties, wholes: Accidents, employmer Describe each claim	nt disputes, ins		t or made a demand for payment to sue	
	■ No □ Yes.	Describe each claim		every nature, including	g counterclaims of the debtor and rights to	set off claims
	■ No	Give specific information	t aiready list			
36		he dollar value of all of yo art 4. Write that number h			ny entries for pages you have attached	\$30,449.20
Pa	rt 5: De	scribe Any Business-Related	I Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
ı	No. Go	own or have any legal or equ to Part 6. Go to line 38.	itable interest i	in any business-related pr	roperty?	
Pa		scribe Any Farm- and Comm ou own or have an interest in fa			n or Have an Interest In.	
46.	■ No.	own or have any legal of Go to Part 7. . Go to line 47.	r equitable in	terest in any farm- or c	commercial fishing-related property?	
Pa	rt 7:	Describe All Property You	Own or Have a	n Interest in That You Did	Not List Above	
53.	Examp ■ No	have other property of a ples: Season tickets, countr				

Page 15 of 60 Case number (if known) Document Debtor 1 **Ernest Milton Kidwell, III**

54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$200,000.00 56. Part 2: Total vehicles, line 5 \$15,200.00 Part 3: Total personal and household items, line 15 57. \$3,330.00 Part 4: Total financial assets, line 36 58. \$30,449.20 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$48,979.20 Copy personal property total \$48,979.20 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$248,979.20

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Ernest Milton Kid	well, III		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	DF NORTH CAROLINA	
Case number (if known)				☐ Check if this is a amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the Pro	perty Y	ou C	aim as	Exem)t

1.	Which set of exemptions are you claiming?	Check one only, eve	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonbank	cruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2711 Chickadee Drive Charlotte, NC	\$200,000.00		\$35,000.00	N.C. Gen. Stat. § 1C-1601(a)(1)
	28269 Mecklenburg County Mecklenburg County Parcel #029-522-35; deed dated 3/28/96; tax value \$149,700; debtor believes would sell for \$200,000. Meck. Cty., NC Foreclosure #18-SP-1754; hearing scheduled for July 10, 20 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	10-1001(a)(1)
	2 beds, 2 dressers, chest of drawers, nightstand, mirror, futon, sofa,	\$2,500.00		\$2,500.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	loveseat, chair and ottoman, 4 sm. tables, kitchen table w/4 chairs, 2 bookcases, books, washer, dryer, refrigerator, sm. appliances, dishes, pots/pans, mower, yard tools, hand tools, b Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	2 TVs, Dell desktop computer, printer, cellphone, stereo	\$550.00		\$550.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

De	Ernest wiiton Kidweii, iii			Case number (ii known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Debtor's clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	N.C. Gen. Stat. § 1C-1601(a)(4)	
	Line Holli Goriedale 775. TTT			100% of fair market value, up to any applicable statutory limit		
	Watch Line from Schedule A/B: 12.1	\$30.00		\$30.00	N.C. Gen. Stat. § 1C-1601(a)(4)	
	Life Hoff Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
	IRA: IRA with Wells Fargo ending9398; value \$29,640.51	\$29,640.51		\$29,640.51	N.C. Gen. Stat. § 1C-1601(a)(9)	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	401K: Wells Fargo 401K plan Line from Schedule A/B: 21.2	\$173.69		\$173.69	11 U.S.C. § 522(b)(3)(C)	
	Line Horr Schedule A/B. 21.2			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)	
	■ No					
	☐ Yes. Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

	Document Pa	age 18 of 60		iani
Fill in this information to identify yo	ur case:			
Debtor 1 Ernest Milton k	(idwell, III			
First Name	· · · · · · · · · · · · · · · · · · ·	t Name	-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Las	t Name	-	
United States Bankruptcy Court for the	WESTERN DISTRICT OF NORTH	CAROLINA	_	
Case number				
(if known)				if this is an led filing
Official Form 106D				
	s Who Have Claims Se	cured by Propert	ty	12/15
	If two married people are filing together, be out, number the entries, and attach it to thi			
1. Do any creditors have claims secured b	by your property?			
☐ No. Check this box and submit	this form to the court with your other sche	edules. You have nothing else	to report on this form.	
■ Yes. Fill in all of the information	helow	3	•	
	bolow.			
	and the second states that the second states	Column A	Column B	Column C
	more than one secured claim, list the creditor's s a particular claim, list the other creditors in Pitical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Financial	Describe the property that secures the cl		\$15,200.00	\$3,800.00
Creditor's Name	2015 Mazda 3 i Touring over 50,	000		
	miles 4D Sedan; 4 cyl; Bose stereo an	4		
D.O. Boy 280002	moon roof; NADA value \$15,200			
P.O. Box 380902 Bloomington, MN	As of the date you file, the claim is: Check			
55438-0902	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Number, Succe, Ony, State a 21p Souce	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortg	age or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number	7809		
2.2 Selene Finance	Describe the property that secures the cl	aim: \$143,100.83	\$200,000.00	\$0.00
Creditor's Name	2711 Chickadee Drive Charlotte	, NC		
	28269 Mecklenburg County			
	Mecklenburg County Parcel #029-522-35; deed dated 3/28/96	· tov		
	value \$149,700; debtor believes	, tax		
	would sell for \$200,000. Meck. (Cty.,		
	NC Foreclosure #18-SP-1754;	•		
9990 Richmond, Suite	hearing scheduled			
400 South	As of the date you file, the claim is: Check apply.	all that		
Houston, TX 77042-4546	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortg car loan)	age or secured		

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Debtor 1 and Debtor 2 only

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Debto	or 1 Ernest Milt	on Kidwell, I	I		С	ase number (if know)		
	First Name	Middle N		ast Name				
_	least one of the debto		☐ Judgment lien from☐ Other (including a ri					
C	ommunity debt							
Date o	debt was incurred		Last 4 digits of	account number	5902			
	West Coast Ser	vicing,						
Z.3	Inc.	3,	Describe the property	that secures the c	laim:	\$14,103.79	\$200,000.00	\$0.00
	Creditor's Name		2711 Chickadee I	Drive Charlotte	, NC			
			28269 Mecklenb	urg County				
			Mecklenburg Co	unty Parcel				
			#029-522-35; dee					
			value \$149,700; c					
			would sell for \$2	•	Cty.,			
			NC Foreclosure	,				
	7911 Warner Av	enue/	hearing schedule As of the date you file					
	Huntington Bea	ach, CA	apply.	, the claim is: Check	k all that			
	92647		☐ Contingent					
	Number, Street, City, Sta	ate & Zip Code	□ Unliquidated					
Who	owes the debt? Ch	eck one	☐ Disputed Nature of lien. Check	all that apply				
_		eck one.	_					
_	ebtor 1 only		An agreement you r	nade (such as morto	gage or secu	red		
	ebtor 2 only		car loan)					
_	ebtor 1 and Debtor 2 of		☐ Statutory lien (such		ic's lien)			
_	least one of the debte		☐ Judgment lien from					
	neck if this claim rela community debt	ates to a	Other (including a ri	ght to offset)				
Date o	debt was incurred		Last 4 digits of	account number	4515			
Add	the dollar value of	your entries in C	olumn A on this page. \	Write that number h	nere:	\$176,204	.62	
			the dollar value totals f	rom all pages.		\$176,204	.62	
Writ	te that number here:					4110,20 11		
Part 2	2: List Others to	Be Notified fo	or a Debt That You Al	ready Listed				
trying than o	to collect from you	for a debt you of the debts tha	we to someone else, list tyou listed in Part 1, lis	t the creditor in Pa	rt 1, and the	en list the collection age	or example, if a collection ncy here. Similarly, if you ional persons to be notifie	have more
	Name, Number, Stre		Zip Code		On which	ı line in Part 1 did you ente	er the creditor? 2.2	
	MTGLQ Invest	•					002	
	c/o Hutchens I P.O. Box 1028	aw Firm			Last 4 dig	gits of account number	902_	
	Fayetteville, N	C 28302						
_	Name, Number, Stre Selene Finance		Zip Code		On which	line in Part 1 did you ente	er the creditor? 2.2	
	c/o Hutchens I				Loct 4 -4:	gits of account number 5	902	
	P.O. Box 1028	_av i iiiii			Last 4 di	gits of account number 3	302	
	Fayetteville, N	C 28302						

			Doo	cument	Page 2	0 of 60		
Fill	in this inforn	nation to identify your	case:					
De	btor 1	Ernest Milton Kid	well III					
00	DIOI I	First Name	Middle Name		Last Name			
De	btor 2							
(Spo	ouse if, filing)	First Name	Middle Name		Last Name			
Un	ited States Ba	nkruptcy Court for the:	WESTERN DIST	RICT OF NO	RTH CAROL	INA		
		• •	-					
_	se number _							
(If KI	nown)							
								amended filing
∩f	ficial Forn	n 106F/F						
		:/F: Creditors W	/ho Have Ur	secured	Claims			12/15
any Scho Scho left. nam	executory cont edule G: Execu edule D: Credit Attach the Con e and case nur	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec	that could result in pired Leases (Officia sured by Property. If ge. If you have no inf	a claim. Also I I Form 106G). I more space is	ist executory Do not include needed, copy	contracts on So any creditors v the Part you ne	chedule A/B: Property (O with partially secured cla ed, fill it out, number the	claims. List the other party to official Form 106A/B) and on aims that are listed in e entries in the boxes on the additional pages, write your
		ors have priority unsecure	d claims against vo	u?				
	No. Go to P							
	☐ Yes.	<u>-</u> .						
Pai		II of Your NONPRIORIT	V Unsecured Clai	ime				
Э.	_	ors have nonpriority unse	_	•				
	☐ No. You hav	ve nothing to report in this p	eart. Submit this form	to the court with	your other sch	edules.		
	Yes.							
4.	unsecured clair	nonpriority unsecured community the creditor separatel or holds a particular claim,	y for each claim. For	each claim listed	d, identify what	type of claim it is	s. Do not list claims alread	y included in Part 1. If more
	_							Total claim
4.1	Capital	One	Last	4 digits of acc	ount number	7072		\$2,362.57
		Creditor's Name						
		nt Services, Inc.		n was the debt	t incurred?			
		arry S. Truman Blvd. harles, MO 63301-40						
		treet City State Zlp Code		of the date you	file, the claim	is: Check all tha	at apply	
	Who incu	rred the debt? Check one.						
	Debtor	1 only		Contingent				
	☐ Debtor	2 only		Jnliquidated				
		1 and Debtor 2 only		Disputed				
		t one of the debtors and an		e of NONPRIOR	RITY unsecure	d claim:		
		if this claim is for a com		Student loans				
	debt	014111113 101 & COIII		Obligations arisir	ng out of a sepa	aration agreeme	nt or divorce that you did r	not
	Is the clai	m subject to offset?		rt as priority clai		3.5.5.110		
	■ No			Debts to pension	or profit-shari	ng plans, and oth	ner similar debts	
	☐ Yes			Other. Specify	Credit Card	d		
			`					

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Debtor 1 Ernest Milton Kidwell, III Case number (if know) 4.2 \$0.00 Capital One Last 4 digits of account number 7021 Nonpriority Creditor's Name c/o Northland Group When was the debt incurred? P.O. Box 390846 Minneapolis, MN 55439 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card; Notice Purposes ☐ Yes 4.3 **Capital One** Last 4 digits of account number 0721 \$1,584.31 Nonpriority Creditor's Name c/o Portfolio Recovery Associates, When was the debt incurred? LLC P.O. Box 12914 Norfolk, VA 23541 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Credit Card Other. Specify 4.4 Horizon Eye Care, PA \$275.76 Last 4 digits of account number 3469 Nonpriority Creditor's Name P.O. Box 602911 When was the debt incurred? Charlotte, NC 28260-2911 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Medical

Document Page 22 of 60 Debtor 1 Ernest Milton Kidwell, III Case number (if know) 4.5 \$187.02 **Ortho Carolina** Last 4 digits of account number 7274 Nonpriority Creditor's Name P.O. Box 602185 When was the debt incurred? Charlotte, NC 28260-2185 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.6 Selene Finance Last 4 digits of account number \$0.00 Nonpriority Creditor's Name c/o Hutchens Law Firm, St. Trustee When was the debt incurred? 4317 Ramsey Street Fayetteville, NC 28311 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Purposes Only. ☐ Yes Star Island Resort & Club 3066 4.7 **Timeshare** \$5,864.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Vacation Break Club, III When was the debt incurred? P.O. Box 3273 Orlando, FL 32802-3273 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify requested.

Maintenance on timeshare; Deed In Lieu was filed 1/29/2013; debtor has copy if

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Debtor	1 Ernest Milton Kidwell, III	Case number (if know)	
	University Carolinas Healthcare		
4.8	System	Last 4 digits of account number 4569	\$272.50
	Nonpriority Creditor's Name Healthcare Receivables Group P.O. Box 10168	When was the debt incurred?	
	Knoxville, TN 37939-0168 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
	University Carolinas Healthcare		
4.9	System Newsday News	Last 4 digits of account number 5532	\$1,333.44
	Nonpriority Creditor's Name Healthcare Receivables Group P.O. Box 10168	When was the debt incurred?	
	Knoxville, TN 37939-0168 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the dam io. check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	Yes	Other. Specify Medical	
4.1	University Carolinas Healthcare System Nonpriority Creditor's Name	Last 4 digits of account number 2086	\$1,039.88
	c/o First Point Collection Resources P.O. Box 26140	When was the debt incurred?	
	Greensboro, NC 27402-6140 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
		•	
	Yes	■ Other. Specify Medical	

Part 3: List Others to Be Notified About a Debt That You Already Listed

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Debtor 1 Ernest Milton Kidwell, III

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 12,919.48
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 12,919.48

		17/7/11/11/	311 1 14(4) 7 37 471 487	
Fill in this infor	mation to identify your	case:		
Debtor 1	Ernest Milton Kid	lwell, III		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF NORTH CAROLINA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Aetna Medical	Medical, vision and dental insurance. Disclosure purposes only.
2.2	AT & T	Phone service. Disclosure purposes only.
2.3	Direct TV	Television service. Disclosure purposes only.

		Docume	ent Page 26 d)T (h()	
Fill in this	information to identify your				
Debtor 1	Ernest Milton Kid	well. III			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:	WESTERN DISTRICT (OF NORTH CAROLINA		
Case numb	per				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	obtore			40/45
Scried	ule n. Tour Cou	enroi 2			12/15
your name	and case number (if known)	. Answer every question			of any Additional Pages, write
.	,	, , ,	·		
■ No □ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana				states and territories include
■ No.	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	P Code		Column 2: The credi	itor to whom you owe the debt that apply:
3.1				☐ Schedule D. line	
	Name			Schedule E/F, line	 e
				☐ Schedule G, line	
	Number Street			_	
(Dity	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			□ Schedule E/F, line	 e
				☐ Schedule G, line	
<u> </u>	Number Street			_	
(City	State	ZIP Code		

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Fill	in this information to identify your ca	ase:							
Del	etor 1 Ernest Milto	n Kidwell, III							
	otor 2 puse, if filing)								
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	Γ OF NORTH CAROLIN	NA					
(If kr	fficial Form 106l		-			3 income	ed filing ent showing as of the fol	postpetitior	
	chedule I: Your Inc	ome			ľ	/IM / DD/ Y	Y Y Y		12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your spith you, do not include	oouse is e informa	living with	you, incl t your spo	ude inform ouse. If mo	ation abou re space is	t your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ing spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Data Analyst						
	Include part-time, seasonal, or self-employed work.	Employer's name	Collabera, Inc.						
	Occupation may include student or homemaker, if it applies.	Employer's address	110 Allen Road Basking Ridge, N	IJ 07920)				
		How long employed t	here? 5.5 mont	hs		_			
Pai	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for ar	y line, writ	e \$0 in the	space. Incl	ude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all em	ployers for	that perso	n on the lin	es below. If	you need
					For De	btor 1	For Deb non-filin	tor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$7	7,800.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3. +	-\$	0.00	+\$	N/A	_

7,800.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Ernest Milton Kidwell, III	-	Ca	ase number (if kr	nown)				
	0	ur line 4 hours	4		For Debtor 1		non	Debtor 2 -filing sp	ouse	
	Cop	by line 4 here	4.	\$	7,800	0.00	\$		N/A	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			.94	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.			1.83	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$		N/A	-
	5e. 5f.	Insurance Demostic support obligations	5e. 5f.		.————	9.35	\$ \$		N/A	-
	5g.	Domestic support obligations Union dues	5i. 5g.			0.00	\$ 		N/A N/A	-
	5h.	Other deductions. Specify:	5g. 5h.			0.00	· · —		N/A	-
6.			_ 6	.· \$			· •			-
		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.		•	2,919		-		N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,880	0.88	\$		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	ď			φ		.	
	Oh	monthly net income. Interest and dividends	8a. 8b.			0.00	\$_ \$		N/A	-
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	OD.	. 4	·	0.00	Φ		N/A	-
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	5 (0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	. \$		0.00	\$		N/A	-
	8e.	Social Security	8e.	. \$		0.00	\$		N/A	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$		0.00	\$		N/A N/A	-
	8h.	Other monthly income. Specify:	8h.	*		0.00	+ \$-		N/A	-
							Ė			- ¬
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	(0.00	\$		N/A	<u>\</u>
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4,880.88	+ \$		N/A =	= \$	4,880.88
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L		·					•
11.	Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		. ,		•	Schedule . 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$	4,880.88
13.		you expect an increase or decrease within the year after you file this form No.	?						Combir nonthl	ned y income
		Yes. Explain: Debtor expects to qualify for Medicare around O	ctobe	er, 2	2018 and wi	II file	an an	nended	Sched	dule I.

Official Form 106I Schedule I: Your Income page 2

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Fill i	n this information to identify your case:				
Debt	Ernest Milton Kidwell, III			ck if this is: An amended filing	
Debt	tor 2			A supplement show	ving postpetition chapter
(Spo	ouse, if filing)			13 expenses as of	the following date:
Unite	ed States Bankruptcy Court for the: WESTERN DISTRICT OF	F NORTH CAROLINA	-	MM / DD / YYYY	
Case	e number				
(If kn	nown)				
Of	ficial Form 106J				
	chedule J: Your Expenses				12/1
Be a	as complete and accurate as possible. If two married promation. If more space is needed, attach another sheet her (if known). Answer every question.				
Part 1.	1: Describe Your Household Is this a joint case?				
••	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, E	expenses for Separate Hous	sehold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes
					□ No
		-		_	☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include No				
	expenses of people other than yourself and your dependents?				
Dort	2: Estimate Your Ongoing Monthly Expenses				
Esti expe	Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date enses as of a date after the bankruptcy is filed. If this is licable date.				
the	ude expenses paid for with non-cash government assi value of such assistance and have included it on Scheicial Form 106l.)			Your exp	enses
(0	10111 1001.		_		
4.	The rental or home ownership expenses for your resipayments and any rent for the ground or lot.	dence. Include first mortgag	ge 4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	i	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		250.00
5.	 Homeowner's association or condominium dues Additional mortgage payments for your residence, su 	ch as home oquity loops	4d. \$ 5. \$		14.00 0.00
J.	Additional mortgage payments for your residence, Su	un as nome edully loans	ე. ֆ	,	V.UU

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Debtor	Ernest Milton Kidwell, III	Case num	ber (if known)	
6. Ut	ilities:			
o. o . 6a		6a.	\$	285.00
6b	•	6b.	· · · · · · · · · · · · · · · · · · ·	50.00
6c		6c.	·	320.00
6d		6d.	· -	0.00
	od and housekeeping supplies	— 7.		425.00
	hildcare and children's education costs	8.	\$	0.00
_	othing, laundry, and dry cleaning	9.	\$	150.00
	rsonal care products and services	10.	·	
	•		·	100.00
	edical and dental expenses	11.	\$	125.00
	ansportation. Include gas, maintenance, bus or train fare.	12.	\$	325.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	·	175.00
	paritable contributions and religious donations	14.	· -	100.00
	surance.	14.	Ψ	100.00
	onot include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	0.00
	b. Health insurance	15b.	·	0.00
_	c. Vehicle insurance	15c.	· -	82.69
	d. Other insurance. Specify:	15d.		0.00
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	ecify: Personal property tax	16.	\$	17.50
	stallment or lease payments:	_		
17	a. Car payments for Vehicle 1	17a.	\$	0.00
17	b. Car payments for Vehicle 2	17b.	\$	0.00
17	c. Other. Specify:	17c.	\$	0.00
17	d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as			0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	her payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	her real property expenses not included in lines 4 or 5 of this form or on Scheo			
	a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.	•	0.00
	c. Property, homeowner's, or renter's insurance	20c.		0.00
20	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
. Ot	her: Specify:	21.	+\$	0.00
2 C s	liculate your monthly expenses			
	a. Add lines 4 through 21.		\$	2,419.19
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	۷,4۱۶.۱۶
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,419.19
3. C a	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,880.88
	b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,419.19
23	c. Subtract your monthly expenses from your monthly income.		•	0.464.60
	The result is your monthly net income.	23c.	\$	2,461.69
)/ D	you expect an increase or decrease in your expenses within the year after you	ı file thic	form?	
	r example, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because of
	diffication to the terms of your mortgage?		, 15 111010000	2. 200.0000 0000000 0
	No.			
	Yes. Explain here:			
	100. Explain note.			

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Fill in this inform	nation to identify your	case:			
Debtor 1	Ernest Milton Kid	well, III			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT	OF NORTH CAROLINA		
Case number _					
(if known)					Check if this is an amended filing
You must file this obtaining money	s form whenever you fi	le bankruptcy schedulen connection with a ban	onsible for supplying corrects s or amended schedules. M ukruptcy case can result in f	aking a false stateme	ent, concealing property, or or imprisonment for up to 20
Sigr	n Below				
Did you pay	y or agree to pay some	one who is NOT an atto	orney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes. N	lame of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
•	Ity of perjury, I declare	that I have read the sur	nmary and schedules filed w	vith this declaration	and

Signature of Debtor 2

Date

X /s/ Ernest Milton Kidwell, III
Ernest Milton Kidwell, III

Signature of Debtor 1

Date June 11, 2018

Fill	in this inform	nation to identify you	r case:			
Deb	otor 1	Ernest Milton Ki	dwell, III Middle Name	Last Name		
	otor 2					
` '	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	kruptcy Court for the:	WESTERN DISTRICT OF	NORTH CAROLINA		
1	se number					
(if kn	nown)				_	Check if this is an amended filing
						arrieriaea ming
∩f	ficial For	m 107				
			Affairs for Individ	luals Filing for B	ankruntov	4/1
info num	rmation. If monber (if known	ore space is needed,). Answer every que	ble. If two married people a attach a separate sheet to t stion. Irital Status and Where You	this form. On the top of any		
				Lived Belore		
1.	What is your	current marital statu	ıs?			
	☐ Married					
	Not mari	ried				
2.	During the la	st 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	Yes. List	all of the places you l	ived in the last 3 years. Do no	t include where you live now	<i>'</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	2711 Chick Charlotte,	kadee Drive NC 28269	From-To: March 1996 to present	☐ Same as Debtor	ı	☐ Same as Debtor 1 From-To:
	■ No □ Yes. Ma	es include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Of	/ada, New Mexico, Puerto R		
Par	t 2 Explain	n the Sources of You	r income			
4.	Fill in the total	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	III businesses, including part-	time activities.	ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$38,940.30	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Ernest Milton Kidwell, III

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last caler January 1 to	ndar year: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$63,643.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	dar year before that: December 31, 2016)	■ Wages, commissions, bonuses, tips	\$68,771.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
□ No	source and the gross inco	ome from each source separa	tely. Do not include income th	nat you listed in line 4.	
		Dalida a 4		Dalita a O	
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	y 1 of current year until filed for bankruptcy:	Wells Fargo stock dividend paid quarterly from IRA	\$214.11		
For last cale	ndar year: December 31, 2017)	Unemployment benefits	\$4,200.00		
	, , ,				

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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Debtor 1 Ernest Milton Kidwell, III

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Absolute Tree Service	Debtor had several rotten trees cut down. On 3/5/18 he paid \$500; 3/12/18 paid \$400; and balance on 4/6/18 paid \$600.	\$1,500.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Tree removal.
	Matthew Templeton	Debtor borrowed in October 2017 \$732; he paid back \$105 in November and \$622 paid back in April, 2018. A total of \$622 paid in the last 90 days.	\$622.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Marvin (don't know last name)	3/12/18 paid \$400 deposit for house painting; and the balance of \$1,100 paid 4/20/18	\$1,500.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other House painting.
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. In alimony.	artners; relatives of any gern control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general partner; corporations ny managing agent, including one for
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		paid yments or transfer a	still owe	ccount of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossessio	ns. and Foreclosures	paid	Still Owe	include deditors hame
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	tcy, were you a party in a			
	□ No ■ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case

7.

8.

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Case number (if known) Document Debtor 1 Ernest Milton Kidwell, III

	Case title Case number	Nature of the case	Nature of the case Court or agency		e case
	Selene Finance has filed a foreclosure action in Mecklenburg County, NC #18-SP-1754. The hearing has been scheduled for July 10, 2018 18-SP-1754.	Foreclosure		■ Pending □ On appe □ Conclud	al
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, foreclosed	d, garnished, attached	I, seized, or levied?
	☐ Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happened			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or financial in	stitution, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
Par	Within 2 years before you filed for bankrupt ■ No	nother official?			
	Yes. Fill in the details for each gift.			_	
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	Describe the gifts		Dates you gave the gifts	Value
	Address:				
14.	Within 2 years before you filed for bankrupt ☐ No ☐ Yes. Fill in the details for each gift or cont		s or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you	contributed	Dates you contributed	Value
	The Heart Fund	Debtor estimates	s \$100 per year	Once a year.	\$100.00
	Misc. others: Char-Meck High School Sports; United Way		domly to the above. couple times a year		\$0.00

Document Page 36 of 60 ase number (if known) Debtor 1 Ernest Milton Kidwell, III Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Date payment Description and value of any property Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Essex Richards, P.A. \$1,000 paid toward Chapter 13 base \$1,000.00 April 9, 2018 1701 South Blvd. Charlotte, NC 28203 hculp@essexrichards.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Nο

Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

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Debtor 1 Ernest Milton Kidwell, III

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIF Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details.

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

Case 18-30896 Doc 1 Filed 06/11/18 Entered 06/11/18 16:59:06 Desc Main Document Page 38 of 60 ase number (if known) Debtor 1 Ernest Milton Kidwell, III 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ernest Milton Kidwell, III Signature of Debtor 2 Ernest Milton Kidwell, III Signature of Debtor 1 Date June 11, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Yes
 Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?
 No
 Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
 Official Form 107
 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Ernest Milton Kidwell, III

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Fill in this inform	nation to identify your case:
Debtor 1	Ernest Milton Kidwell, III
Debtor 2 (Spouse, if filing)	
United States B	Bankruptcy Court for the: Western District of North Carolina
Case number (if known)	

Check	as directed in lines 17 and 21:					
	According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1:	Calculate Your Average Monthly Income							
1.	What	is your marital and filing status? Check one of	nly.						
	■ No	ot married. Fill out Column A, lines 2-11.							
	□ Ma	arried. Fill out both Columns A and B, lines 2-11.							
10 the	1(10A) e 6 moi	e average monthly income that you received from al i. For example, if you are filing on September 15, the 6- inths, add the income for all 6 months and divide the tota own the same rental property, put the income from that	month peri al by 6. Fill	od would in the re	I be March 1 throusult. Do not include	ugh Aug de any	gust 31. If the amount m	ount of your monthly incom ore than once. For examp	e varied during le, if both
						Colui Debt		Column B Debtor 2 or non-filing spouse	
2.		gross wages, salary, tips, bonuses, overtime Il deductions).	, and cor	nmissi	ons (before all	\$	6,670.05	\$	
3.		ony and maintenance payments. Do not includent B is filled in.	e paymer	nts from	a spouse if	\$	0.00	\$	
4.	of your	mounts from any source which are regularly push or your dependents, including child supportan unmarried partner, members of your househo commates. Do not include payments from a spousted on line 3.	t. Include ld, your d	regula epende	r contributions nts, parents,	\$	0.00	\$	
5.		ncome from operating a business, ssion, or farm	Debtor '	1					
	Gross	s receipts (before all deductions)	\$	0.00					
	Ordin	ary and necessary operating expenses	-\$	0.00					
	Net m	nonthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net ir	ncome from rental and other real property	Debtor '						
	Gross	s receipts (before all deductions)	\$	0.00					
	Ordin	ary and necessary operating expenses	- \$	0.00					
	Net m	nonthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 18-30896 Doc 1 Filed 06/11/18 Entered 06/11/18 16:59:06 Desc Main Document Page 41 of 60 **Ernest Milton Kidwell, III** Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Wells Fargo - stock dividend from IRA 71.37 \$ 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 6.741.42 \$ 6,741.42 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 6,741.42

- 13. Calculate the marital adjustment. Check one:
 - You are not married. Fill in 0 below.
 - You are married and your spouse is filing with you. Fill in 0 below.
 - You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

	\$ + \$		
Total	\$	0.00	Copy here=>

14. Your current monthly income. Subtract line 13 from line 12.

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year).

15b. The result is your current monthly income for the year for this part of the form.

\$ 6,741.42

0.00

6,741.42

x 12 80,897.04 Case 18-30896 Doc 1 Filed 06/11/18 Entered 06/11/18 16:59:06 Desc Main Document Page 42 of 60

Ernest Milton Kidwell, III Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: NC 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 1 16c. Fill in the median family income for your state and size of household. 46.438.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 6.741.42 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 6,741.42 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 6,741.42 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 80,897.04 \$ 20b. The result is your current monthly income for the year for this part of the form 46,438.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Ernest Milton Kidwell, III Ernest Milton Kidwell, III Signature of Debtor 1 Date June 11, 2018 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in t	his information to i	dentify your case:				
Debtor	1 Ernest Mi	ton Kidwell, III				
Debtor :	2 e, if filing)					
United :	States Bankruptcy Co	ourt for the: Western District o	f North Carolina			
Case no				☐ Check if	this is an amended fili	ng
	Form 122C-2 Oter 13 Calc	ulation of Your D	Disposable Ir	ncome		04/10
	ut this form, you wi ment Period (Officia		of Chapter 13 Stateme	nt of Your Current Monthly Ind	come and Calculation o	ıf
space is	s needed, attach a s		clude the line number	ther, both are equally respons to which additional informatio		
Part 1:	Calculate Your	Deductions from Your Income	e			
the q	uestions in lines 6-		, go online using the li	r certain expense amounts. Usink specified in the separate in		
expe	nses if they are highe	er than the standards. Do not inc	clude any operating exp	nse. In later parts of the form, you enses that you subtracted from income in line 13 of Form 122C	income in lines 5 and 6 of	
If you	ır expenses differ fro	m month to month, enter the ave	erage expense.			
Note	: Line numbers 1-4 a	re not used in this form. These r	numbers apply to inform	nation required by a similar form	used in chapter 7 cases.	
5.	The number of peo	ole used in determining your	deductions from inco	ne		
		people who could be claimed as ny additional dependents whom a in your household.			1	
Natio	onal Standards	You must use the IRS Nati	onal Standards to answ	ver the questions in lines 6-7.		
		other items: Using the numbe dollar amount for food, clothing,		in line 5 and the IRS National	\$	647.00
	the dollar amount for people who are 65 o	out-of-pocket health care. The	number of people is spl ave a higher IRS allowa	tered in line 5 and the IRS Natio it into two categoriespeople whance for health car costs. If your	no are under 65 and	

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Document Page 44 of 60 **Ernest Milton Kidwell, III** Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 52.00 Copy here=> \$ 52.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 7g. **Total.** Add line 7c and line 7f 52.00 52.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 466.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 984.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Selene Finance** 875.02 West Coast Servicing, Inc. 87.44 Copy Repeat this amount 962.46 9b. Total average monthly payment on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage 21.54 21.54 or rent expense). If this number is less than \$0, enter \$0. here=>

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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Debtor 1	Ernest Milton Kidwell, II	<u> </u>		С	ase number (if known)		
11.	Local transportation expense	s: Check the number of vehic	cles for which y	ou claim ar	n ownershi _l	p or operating	g expense.	
	☐ 0. Go to line 14.							
	■ 1. Go to line 12.							
	2 or more. Go to line 12.							
	Vehicle operation expense: U							196.00
	operating expenses, fill in the C	, ,	•	ŭ	•			
	Vehicle ownership or lease ex You may not claim the expense more than two vehicles.	if you do not make any loan	or lease payme	ents on the	vehicle. In	nip or lease e addition, you	expense for each way not claim the	e expense for
Veh	nicle 1 Describe Vehicle 1:	2015 Mazda 3 i Touring Bose stereo and moon				4 cyl;		
13a.	Ownership or leasing costs using	ng IRS Local Standard			\$	497.00		
	Average monthly payment for a	•						
	Do not include costs for leased	vehicles.						
	To calculate the average month are contractually due to each sebankruptcy. Then divide by 60.							
	Name of each creditor fo	r Vehicle 1	Average mor	nthly				
	Ally Financial		\$ 3	16.67				
	Total .	Average Monthly Payment	\$3	40.07	Copy here =>	\$ 310	Repeat this amount on line 33b.	
40-	Not Vahiala dan manahin an laga						Copy net	
	Net Vehicle 1 ownership or leas Subtract line 13b from line 13a.	•), enter \$0				Vehicle 1 expense here	
					\$	180.33	=> \$ _	180.33
Veh	nicle 2 Describe Vehicle 2:						_	
13d.	Ownership or leasing costs usir				\$	0.00		
	Average monthly payment for a leased vehicles.	II debts secured by Vehicle 2.	. Do not include	costs for				
	Name of each creditor fo	r Vehicle 2	Average mor	nthly				
			_ \$					
					Сору		Repeat this	
	Total	average monthly payment	\$	I	here => -\$	0.0	amount on line 33c.	
13f.	Net Vehicle 2 ownership or leas	se expense					Copy net	
	Subtract line 13e from line 13d.	if this number is less than \$0), enter \$0		1	0.00	Vehicle 2 expense here	0.00
					\$	0.00	=> \$ _	0.00
	Public transportation expension Public Transportation expension						n the \$	0.00
	Additional public transportati also deduct a public transportat not claim more than the IRS Lo	ion expense, you may fill in w	vhat you believe					0.00

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Debtor 1 Ernest Milton Kidwell, III Case number (if known)

		ddition to the expense de following IRS categories.		s listed above	, you are allowed your monthly expenses	for	
16.	6. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						1,395.74
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.						
	Do not include amounts that are	not required by your job	, such as	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						0.00
19.	Court-ordered payments: The administrative agency, such as Do not include payments on pas	spousal or child support p	payment	S	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly a	mount that you pay for ed	ducation	that is either i	required:		
	as a condition for your job, o	r			•		
	for your physically or mentall	y challenged dependent	child if n	o public educ	ation is available for similar services.	\$	0.00
21.		nount that you pay for ch	ildcare, s	such as babys	sitting, daycare, nursery, and preschool.	\$	0.00
22.		d welfare of you or your	depende	nts and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.	_	22.00
	Payments for health insurance of	or health savings account	ts should	be listed only	y in line 25.	\$	23.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						
	expenses, such as those report	ed on line 5 of Official Fo	rm 122C	-1, or any am		+\$	0.00
24.	Add all of the expenses allow			•		+ \$ \$	2,981.61
			se allow	vances.	ount you previously deducted.		
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in	ed under the IRS expen These are additional de Note: Do not include an surance, and health sa	eductions by expensions	vances. allowed by the se allowances account expen	ount you previously deducted.	\$	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance,	ed under the IRS expen These are additional de Note: Do not include an surance, and health sa	eductions by expensions	vances. allowed by the se allowances account expen	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents.	ed under the IRS expen These are additional de Note: Do not include an surance, and health sa	eductions by expensions vings ac unts that	vances. allowed by the se allowances account expensare reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance	ed under the IRS expen These are additional de Note: Do not include an surance, and health sa	eductions by expensivings acunts that	vances. allowed by the se allowances account expensare reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance	ed under the IRS expen These are additional de Note: Do not include an surance, and health sa and health savings account	eductions by expensivings acunts that	vances. allowed by the se allowances acount expensare reasonabees 434.05	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account	These are additional de Note: Do not include an surance, and health sa and health savings account the Note:	eductions by expensivings acunts that \$ \$	vances. allowed by the seallowances allowances are reasonab 434.05 0.00 0.00	ne Means Test. Is listed in lines 6-24. Is lises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,981.61
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total	These are additional de Note: Do not include an surance, and health sa and health savings account the Note:	eductions by expensivings acunts that \$ \$	vances. allowed by the seallowances allowances are reasonab 434.05 0.00 0.00	ne Means Test. Is listed in lines 6-24. Is lises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,981.61
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you a Yes Continued contributions to the continue to pay for the reasonal	These are additional de Note: Do not include an surance, and health sa and health savings account amount? ctually spend?	ductions by expensivings acunts that \$ \$ \$ family not supposition unable.	allowed by the se allowances are reasonable 434.05 0.00 0.00 434.05 members. The ort of an elder let to pay for se	ce actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These ways and the control of the control o	\$	2,981.61
25.	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you are Yes Continued contributions to the continue to pay for the reasonal your household or member of you include contributions to an acco	These are additional de Note: Do not include an surance, and health sa and health savings account the same and health savings account the same and health savings account the same account the sa	ductions by expensivings acunts that \$ \$ \$ family n nd suppo is unab rogram. cessary	vances. allowed by the se allowances are reasonable 434.05 0.00 0.00 434.05 nembers. The ort of an elder le to pay for se 26 U.S.C. § 5 monthly expe	ce actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These ways and the control of the control o	\$s	2,981.61

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btor 1	Ernest Milton Kidwell, III	Case number (if known)						
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operating expenses	on					
	If you believe that you have home energy of 8, then fill in the excess amount of home en	costs that are more than the home energy costs included in expenses or nergy costs	ı line					
	You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.							
	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	dren who are younger than 18. The monthly expenses (not more than ependent children who are younger than 18 years old to attend a private	or					
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.						
	* Subject to adjustment on 4/01/19, and eve	•	\$	0.00				
		tional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.						
	You must show that the additional amount	claimed is reasonable and necessary.		\$	0.00			
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute in the form of cash or financianization. 11 U.S.C. § 548(d)(3) and (4).	ial					
	Do not include any amount more than 15%	of your gross monthly income.	_	\$	0.00			
	32. Add all of the additional expense deductions. Add lines 25 through 31.							
Dedu	ictions for Debt Payment							
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehicle 33a through 33e.						
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	nent, add all amounts that are contractually due to each secured unkruptcy. Then divide by 60.						
	Mortgages on your home				monthly			
33a.	Copy line 9b here	_	:> \$	aymen	962.46			
ooa.			. - •		902.40			
00L	Loans on your first two vehicles		. •		040.07			
33b.			:> \$		316.67			
33c.	Copy line 13e here		:> \$		0.00			
33d.	List other secured debts:							
Name	e of each creditor for other secured debt	Identify property that secures the debt Does paymer include taxes or insurance?						
		□ No						
	-NONE-	☐ Yes	\$					
		□ Yes	\$					
		Yes •	\$					
		t	Copy otal		4.070.46			
33e	Total average monthly payment. Add lines	- 00- 4b	ere=>	\$	1,279.13			

Case 18-30896 Doc 1 Filed 06/11/18 Entered 06/11/18 16:59:06 Page 48 of 60 Document **Ernest Milton Kidwell, III** Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Monthly cure Total cure amount amount 2711 Chickadee Drive Charlotte, NC 28269 Mecklenburg County **Mecklenburg County Parcel** #029-522-35; deed dated 3/28/96; tax value \$149.700: debtor believes would sell for \$200,000. Meck, Ctv., NC Foreclosure #18-SP-1754: hearing Selene Finance **6,278.82** \div 60 = \$ 104.65 scheduled 2711 Chickadee Drive Charlotte, NC 28269 Mecklenburg County **Mecklenburg County Parcel** #029-522-35; deed dated 3/28/96; tax value \$149,700; debtor believes would sell for \$200,000. Meck. Cty., NC Foreclosure #18-SP-1754; hearing West Coast Servicing, Inc. **8,962.12** \div 60 = \$ scheduled $\div 60 = +\$$ Copy total 254.02 254.02 Total | \$ here=> \$ 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ■ No. Go to line 36. $\ \square$ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷60 \$ 0.00 36. Projected monthly Chapter 13 plan payment 2.460.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 4.85 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 119.31 119.31 here=> Average monthly administrative expense 1.652.46 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income**

38. Add all of the allowed deductions.

. Add an of the another acquestions.				
Copy line 24, All of the expenses allowed under IRS expense allowances	\$	2,981.61		
Copy line 32, All of the additional expense deductions	\$	434.05		
Copy line 37, All of the deductions for debt payment	+\$	1,652.46	٦	
Total deductions	\$	5,068.12	Copy total here=>	\$ 5,068.12

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Ernest Milton Kidwell, III Debtor 1 Case number (if known) Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Part 2: 39. Copy your total current monthly income from line 14 of Form 122C-1. Chapter 13 6.741.42 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 0.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 5,068.12 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Сору 0.00 0.00 Total \$ here=> \$ Copy 44. **Total adjustments.** Add lines 40 through 43. 5.068.12 5,068.12 here=> -\$ 1,673.30 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ Decrease □ 122C-2 ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease □ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease

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Debtor 1 Ernest Milton Kidwell, III

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2017 to 05/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Collaberra, Inc.

Income by Month:

6 Months Ago:	12/2017	\$1,080.00
5 Months Ago:	01/2018	\$10,428.75
4 Months Ago:	02/2018	\$7,200.00
3 Months Ago:	03/2018	\$6,911.55
2 Months Ago:	04/2018	\$7,200.00
Last Month:	05/2018	\$7,200.00
	Average per month:	\$6,670.05

Line 10 - Income from all other sources

Source of Income: Wells Fargo - stock dividend from IRA

Income by Month:

6 Months Ago:	12/2017	\$214.11
5 Months Ago:	01/2018	\$0.00
4 Months Ago:	02/2018	\$0.00
3 Months Ago:	03/2018	\$214.11
2 Months Ago:	04/2018	\$0.00
Last Month:	05/2018	\$0.00
	Average per month:	\$71.37

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-30896 Doc 1 Filed 06/11/18 Entered 06/11/18 16:59:06 Desc Main Document Page 56 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of North Carolina

In re	Ernest Milton Kidwell, III		Case No.	
	·	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DE	BTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir per rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,500.00
	Prior to the filing of this statement I have received.			1,000.00
	Balance Due		\$	3,500.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the national compensation.			
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy ca	ase, including:
l	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, stat c. Representation of the debtor at the meeting of credited d. [Other provisions as needed] 	ement of affairs and plan which	h may be required;	
6.]	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	g service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.		r payment to me for re	epresentation of the debtor(s) in
J	une 11, 2018	/s/ Heather W. Cu		
D	ate	Heather W. Culp Signature of Attorno Essex Richards, 1701 South Blvd Charlotte, NC 28	ey P.A.	
		704-377-4300 Fa		
		Name of law firm		_

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United States Bankruptcy Court Western District of North Carolina

Western District of North Caronia				
In re	Ernest Milton Kidwell, III		Case No.	
		Debtor(s)	Chapter	13
VERIFICATION OF CREDITOR MATRIX				
The ob	ove named Debter bereby varifies that	the etteched list of evalitors is true and	correct to the best	of his/har knowledge
The ab	ove-named Debtor hereby verifies that	the attached list of creditors is true and	correct to the best	of ms/her knowledge.
Date:	June 11, 2018	/s/ Ernest Milton Kidwell, III		
		Ernest Milton Kidwell, III		

Signature of Debtor

Ernest Milton Kidwell, III P.O. Box 561167 Charlotte, NC 28256

Heather W. Culp Essex Richards, P.A. 1701 South Blvd. Charlotte, NC 28203

City-County Tax Collector P O Box 31637 Charlotte, NC 28231

Internal Revenue Service P O Box 7346 Philadelphia, PA 19101-7346

North Carolina Department of Revenue Bankruptcy Unit P O Box 1168 Raleigh, NC 27602-1168

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U.S. Attorney General U.S. Department of Justice 950 Pennsylvania Avenue, NW Washington, DC 20530-0001

Ally Financial P.O. Box 380902 Bloomington, MN 55438-0902

Capital One c/o Client Services, Inc. 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047

Capital One c/o Northland Group P.O. Box 390846 Minneapolis, MN 55439 Capital One c/o Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541

Horizon Eye Care, PA P.O. Box 602911 Charlotte, NC 28260-2911

MTGLQ Investors, LP c/o Hutchens Law Firm P.O. Box 1028 Fayetteville, NC 28302

Ortho Carolina P.O. Box 602185 Charlotte, NC 28260-2185

Selene Finance 9990 Richmond, Suite 400 South Houston, TX 77042-4546

Selene Finance c/o Hutchens Law Firm, St. Trustee 4317 Ramsey Street Fayetteville, NC 28311

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Star Island Resort & Club Timeshare c/o Vacation Break Club, III P.O. Box 3273 Orlando, FL 32802-3273

University Carolinas Healthcare System Healthcare Receivables Group P.O. Box 10168 Knoxville, TN 37939-0168

University Carolinas Healthcare System c/o First Point Collection Resources P.O. Box 26140 Greensboro, NC 27402-6140

West Coast Servicing, Inc. 7911 Warner Avenue Huntington Beach, CA 92647